Risk Assessment and Protocol for Patients with a Learning Disability Accessing the Health Services at GP practice

Guidance

This guidance is created for when a GP surgery, a care provider or family who support a person with a learning disability identify possible triggers of agitated behaviour for that person which impacts their ability to safely accept and tolerate healthcare.

For some people it is hard to understand changes and they may only be able to express this fear or agitation through behaviours which put themselves and / or others at risk of harm. These may be everyday changes e.g.

- breaking usual routine to go to the GP for an appointment
- Having to wait and not understanding what they are waiting for and why.

These could be health changes e.g.

- Feeling unwell and not understanding this change in feeling
- Having pain and not being able to explain it.

If the person is known to express fears, anxiety and pain through behaviours which could pose themselves or others at risk of harm, then it is essential that the person, those that support them and the GP practice work together to complete this Risk Assessment and Protocol for accessing healthcare.

This must then be flagged on the GP system and clear in their Purple Folder as well as be followed by the people who support the person to ensure that they are supported to NOT be put in a situation where they may express their feelings through behaviours that put themselves or others at risk.

STEP ONE Action for GP practice

1. If you identify anyone on your patient Learning Disability register who you know to have behaviours that can put themselves or others at risk, then ask the people who support them to complete the Risk Assessment and Protocol and Liaise back with the relevant practitioners in the surgery to confirm the plan.

STEP TWO Action for people who support the person

1. If the GP identifies someone who requires a risk assessment and protocol for accessing the GP
   OR if you identify someone you support who requires this, then complete the document
2. Ensure you discuss with ALL the people who support the person and collectively agree the most appropriate plan of support and complete the document. Liaise back with the GP surgery to confirm the plan
3. Ensure this is always followed by those supporting the person with accessing healthcare.

STEP THREE Action for Surgery and The People who support

1. If, between the surgery and the people supporting the person, you are unable to reach agreement of a plan that reduces the risk and provides a protocol of response if the persons behaviours do escalate in the health setting, then make a referral to Community Learning Disability Nurses to support with assessing the risks and creating a plan that enables health care to be achieved by the surgery.

NHS
eQUALITY for people with learning disabilities
Hertfordshire

Risk Assessment and Protocol for Patients with a Learning Disability Accessing the Health Services at GP practice

Name DOB

Address

NHS No.

Protocol created and agreed by [name people who support at home and members of GP practice agreeing the plan]

Date of Plan

Risk Assessment and Protocol for Accessing the Health Services at GP practice	
Known Behaviours that pose a risk to self or others [be as specific and descriptive as possible]	For example this may be things like [delete these examples when you complete] • Slaps self • Slaps out at others faces • Pushes away forcefully • Pulls hair [own or others] • Spits • Screaming • Tipping over furniture • Biting
Signs they are becoming agitated and need time out to calm [be descriptive of exactly what this looks like]	For example this may be things like [delete these examples when you complete] • Rocking • Groaning • Looking around urgently • Biting hand • Standing up and going towards the door
Known Triggers in the hours before the appointment - Things that, if happen,are likely to make this risk of behaviour escalation more likely	For example, this may be things like [delete these examples when you complete] • If household has been noisy in the morning • Disturbing route and appointment clashing with meal / activity plan • Not being forewarned they are going out and why • Feeling poorly • Not having familiar staff supporting that day • Traffic issues • Parking issues at the surgery
Known Triggers that could cause a sudden change in	For example this may be things like [delete these examples when you complete] • GP surgery being noisy.

NHS
eQUALITY for people with learning disabilities
Hertfordshire

Risk Assessment and Protocol for Patients with a Learning Disability Accessing the Health Services at GP practice

Risk Assessment and Protocol for Accessing the Health Services at GP practice	
their behaviour at the time of the appointment	• Having to wait when they arrive • People they don't know talking to them while they wait. • Not having familiar staff with them • Clinician doing something to them that they were not expecting, and staff had not prepared them for • Clinician making eye contact. • Clinician not explaining what they are about to do and giving time for them to process this
The Protocol for reducing the risks but ensure health care is achieved	For example, this may be things like [delete these examples when you complete] • When booking appointment surgery will flag that they need to be seen straight away on arrival. • Staff to request a time of day that will work for the person without breaching routine [flag on GP system that this is a reasonable adjustment] • If person has triggers before attending and staff assess the risk is high – contact the surgery and request a telephone appointment at the appointment time to discuss health concern and triage safest way for clinician to assess them – This may be GP asking carer to do some simple physical checks or use video call to enable them to assess whether it is safe to delay appointment. Or may require reasonable adjustment of home visit. • 2 Familiar staff, trained in managing behavioural outbursts to always accompany to appointments – care team to rearrange the appointment if they are unable to do this. • Care staff to continuously monitor for known early warning signs of distress and speak up immediately and remove the person from the surgery using their calming strategies BEFORE behaviours escalate. • If Surgery staff see any of the above signs of becoming agitated that the staff aren't reacting to – immediately ask the care staff to action this protocol. • If unforeseen circumstance mean waiting time – surgery staff to contact on XXX number and request to delay arrival. If this occurs on arrival offer quiet room to wait in with just their care staff. • Possible use of a safe word that indicates it is time to end the appointment immediately. • Possible use of a GP room on ground floor that has an easy / safe exit route? • Ensure person is always seated / seen in a place where others can leave to safety easily or the person can be removed without contact with others safely. • Ensure they are seen / wait in a room with minimal items that could be used to harm others being available.

NHS
eQUALITY for people with learning disabilities
Hertfordshire

Risk Assessment and Protocol for Patients with a Learning Disability Accessing the Health Services at GP practice

Risk Assessment and Protocol for Accessing the Health Services at GP practice	
The support plan if the behaviours escalate and the person poses a risk to themselves or others **[In Line with AMBER and RED Strategies if you have a PBS plan in place]**	For example this may be things like [delete these examples when you complete] • Care staff lead them outside **before** behaviours escalate if signs are noted– sit in car, listen to music. • Once feel they are calmer – assess risks by initially clinician going to the car and talking through the open window to ascertain if risk level has dropped and carers feel it is safe to enter the surgery. • If behaviours do escalate suddenly and unexpectedly in the practice – carers to use their identified strategies to remove them from the practice Immediately. All clinical staff and other patients not to intervene.